

ISSUE SLIP STAPLE AREA (for additional cross references)

3/1085

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>S.F.</i>		<i>5-18-01</i>
<b>FORMALITY REVIEW</b>	<i>S.F.</i>	<i>1095</i>	<i>6/22/01</i>
<b>RESPONSE FORMALITY REVIEW</b>	<i>S.F.</i> <i>TAP</i>	<i>1110</i>	<i>10-05-01</i>

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

7-25-01  
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